ATTACHMENT

Family planning clinic maximum allowable fees, effective for dates of service on and after February 1, 2003

Refer to the following table for increased family planning clinic maximum allowable fees, effective for dates of service on and after February 1, 2003.

Procedure code	Description	Maximum allowable fee			
Current Pro	Current Procedural Terminology (CPT) codes				
99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: • A problem focused history; • A problem focused examination; and • Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.	\$19.60			
99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: • An expanded problem focused history; • An expanded problem focused examination; and • Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 20 minutes face-to-face with the patient and/or family.	\$32.98			
99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: • A detailed history; • A detailed examination; and • Medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.	\$49.30			
99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: • A comprehensive history; • A comprehensive examination; and • Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 45 minutes face-to-face with the patient and/or family.	\$70.54			

Procedure code	Description	Maximum allowable fee			
CPT codes (CPT codes (continued)				
99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: • A comprehensive history; • A comprehensive examination; and • Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.	\$89.74			
99211	Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.	\$10.87			
99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: • A problem focused history; • A problem focused examination; • Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.	\$19.56			
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: • An expanded problem focused history; • An expanded problem focused examination; • Medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family.	\$27.00			
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: • A detailed history; • A detailed examination; • Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family.	\$42.46			

Procedure code	Description	Maximum allowable fee		
CPT codes (continued)				
99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: • A comprehensive history; • A comprehensive examination; • Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.	\$62.22		
Healthcare Common Procedure Coding System code				
J7300	Intrauterine copper contraceptive	\$137.70		
Local codes				
W6117	Depo-medroxyprogesterone, 150 mg	\$35.10		
W6207	Oral contraceptives	\$14.20		